Division of Corporations



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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE **DLW SOLUTIONS LLC**

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

i. i	Name of the limited liability company:	ONS, LLC	 	
2. (a)	(b		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limi (Note: MAY BE PO	ited liability company:
	7901 4th St N STE 300		7901 4th St N STE 300	
	St. Petersburg FL 33702		St. Pelersburg FL 33702	
	01/22/25		.25000039734	
3.	Date of filing/registration in Florida	4,	Document number	г
5. (a)	LAMISON-WHITE, DARREN			
	Registered Agent and Registered Office shown on the records			
	4250 BISCAYNE BLVD.		* * * * * * * * * * * * * * * * * * *	:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			a
(b)	714		1 1 15.3 1.3	FIL. 2025 FEB -4
	MIAMI	FL_33137		A A
	Nortnwest Registered Agent LLC		90 :0 90 :0	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			ress:
	7901 41h St N			
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg	FL. 33702		
the cl agent was/v	limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the	laws of the of the regis liability co s of the lim	ered office and the business of appany, it is hereby confirmed ted liability company or as of ability company.	office of the registered I that the change(s)
····	nature of a member or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·	Nat Smith Printed or typed name of signee	
l her provi the oi to me	why accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provide rely reflect a change in the registered office address, and in writing of this change. Taylor Newman - Assistant	te performa ded for in C I herchy ca	in this capacity. I further agr	ree to comply with the
Signa	ture of Registered Agent	. Decretary		